

218263

## STATE OF SOUTH CAROLINA

## (Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Application for class E - Household Goods from  
Eric Weaver dba  
PizzaCoke moving Co.

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

## TRANSPORTATION COVER SHEET

DOCKET  
NUMBER: 2009 - 319 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Eric Weaver

Telephone: 864-630-7161

Address: 14 Circle Dr.  
Greenville SC 29617

Fax: 864-235-0808

Other:

Email: PizzaCoke@aatt.net

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

## NATURE OF ACTION (Check all that apply)

- ☐ Application - Class C Taxi  
☐ Application - Class C Charter  
☐ Application - Class C Charter Bus  
☐ Application - Class C Non-Emergency  
☒ Application - Class E Household Goods  
☐ Application - Class E Hazardous Waste  
☐ Application

- ☐ Request for Extension to Comply with Order  
☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded  
☐ Request for Cancellation of Certificate  
☐ Request for Suspension  
☐ Request for Reinstatement  
☐ Request for Name Change on Certificate

- ☐ Request to Amend Scope of Authority  
☐ Request to Amend Tariff (rate Increase, etc.)  
☐ Request to Amend Passenger Limit  
☐ Request  
☐ Exhibit  
☐ Late-Filed Exhibit  
☐ Letter  
☐ Proposed Order  
☐ Publisher's Affidavit  
☐ Reservation Letter  
☐ Response  
☐ Return to Petition  
☐ Other: \_\_\_\_\_

RECEIVED

JUL 30 2009

PSC SC  
DOCKETING DEPT.

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
101 Executive Center Drive, Suite 100  
Columbia, South Carolina 29210  
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 FAX: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF  
MOTOR VEHICLE CARRIER

Select Class: (Check one)

Date: July 22, 2009

- ☒ E (HHG) - Household Goods  
☐ E (HAZ) - Hazardous Material

**IMPORTANT!** If application is to request reinstatement or amend scope of authority, a current annual report must be on file with the Commission before application will be accepted. If application is for a NEW CERTIFICATE, do not submit annual report.

Check one:

- ☒ New Application  
☐ Amended Scope of Authority

Current Scope:  
(list counties) \_\_\_\_\_

Amended Scope:  
(list counties) \_\_\_\_\_

- ☐ Reinstatement of Authority

My Certificate of Public Convenience and Necessity Number is \_\_\_\_\_. My certificate was revoked/  
cancelled on \_\_\_\_\_ because \_\_\_\_\_.

I am seeking reinstatement because \_\_\_\_\_

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Eric Weaver PIZZA CAKE MOVING COMPANY

dba

14 CIRCLE DR GREENVILLE SC 29617  
Street Address of Applicant

Mailing Address of Applicant if different from street address

864-630-7161

Phone

864-235-0808

FAX

pizzacake@att.net  
Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

- ☒ Individual Owner/Sole Proprietorship  
☐ Partnership - List names and address of all person having an interest in the business.  
☐ Corporation - List names and addresses of two principal officers.

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4. Applicant proposes to operate service as follows: (Check one.)

- ☒ Intrastate Only      ☐ Interstate Only      ☐ Both

5. Is applicant certified to provide **intrastate** transportation of household goods in another state: (Check one.)

- ☐ Yes      ☒ No

*If yes, attach a letter from the regulatory agency in the state(s) stating applicant is in compliance with the rules and regulations of said state agency.*

6. Has applicant been convicted of operating with no intrastate household goods authority or failure to abide by the rules and regulations pertaining to the intrastate transportation of household goods in this state or any other state? (Check one.)

- ☒ Yes      ☐ No

*If yes, list dates and nature of convictions below.*

7-17-09 Convicted of advertising as Motor Carrier of Household Goods  
w/out Authority.

7. Has applicant ever had a certificate authorizing the transportation of household goods revoked in this state or any other state? (Check one.)

- ☐ Yes      ☒ No

*If yes, list dates and nature of revocations below.*

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

## BALANCE SHEET

Balance at Time Application is Filed:

Month June Year 2009

### Assets:

Cash	\$ 70
Receivables	\$ 120
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	\$ 10,000 for truck
Garage Equipment (Net)	
Machinery and Tools (Net)	\$ 600, tools, straps, hand trucks, dollies
Supplies on Hand	\$ 75, blankets
Prepays and Other Assets	\$ 850 - 6 1/2 Ins.
<b>Total Assets</b>	<b>\$ 11,715</b>
<b><u>Liabilities and Equity:</u></b>	
Accounts Payable	\$ 0
Notes Payable	\$ 0
Mortgages Payable	
Equipment Obligations	\$ 0
Accrued Salaries and Wages	\$ 0
Other Accrued Obligations	\$ 0
Other Liabilities	Insurance, \$ 70/wk \$ 850/yr
<b>Total Liabilities</b>	<b>\$ 920/yr</b>
Capital Stock	\$ 0
Retained Earnings	\$ 0
<b>Total Equity</b>	
<b>Total Liabilities and Equity</b>	

**PROPOSED RATES AND CHARGES FOR SERVICE**

Proposed Rates and Charges for Service are as follows:

*Please see Attached.*

**COMMODITIES TO BE TRANSPORTED AND AREA(S) TO BE SERVED**

Commodities to be Transported: (Check one)

☒ Household Goods, as defined in R103-210(1)

☐ Hazardous Wastes, as defined in R103-210(2)

Areas to be Served: (List each county in which you plan to operate)

*Greenville* *Spartanburg*  
*Pickens*

Pizza Cake Moving Co.  
14 Circle Dr.  
Greenville SC 29617

**Rates and Payment**

Hourly rates are as follows:

- Up to two men, base rate of \$65 per hour.
- Three-man crew, \$85 per hour.
- Additional men provided as requested and as available at a rate of \$15 per man per hour.

One 16' box truck is included at no additional charge, unless a larger truck is required or requested, in which case the base hourly rate is \$90 per hour.

A base travel fee of 30 minutes or 60 minutes, depending on distance and travel time from Greenville, is applied at the hourly rate for the job to the final bill, which is computed to the nearest quarter-hour.

Notwithstanding travel time, fees begin to accrue on arrival at job site, and stop when work is completed or either party for any reason terminates the agreement.

Payment is due on completion, unless other arrangements are made before work begins.

If work will take more than one day, Pizza Cake Moving reserves the right to request payment for completed work at the end of the day.

**Pianos and other Specialty Items**

A \$35 charge will be added to final bill for each upright or spinet piano Pizza Cake chooses to move. Pizza Cake evaluates each piano we are asked to move on a case by case basis. If we do not believe that we can move your piano safely for your piano and our crew, we will decline to move it. We do not move grand or baby grand pianos.

**Overnight Storage**

If it becomes necessary to store your belongings on our truck(s) or at our facility overnight, an \$85 charge will be applied to the final bill.

**Damages**

Pizza Cake Moving takes seriously the trust our customers place in us to treat their belongings gently and with respect. We take every precaution and care to get your possessions safely from one place to another. Unfortunately, sometimes damage occurs despite our best efforts. We will, however, be responsible only for damage that we have caused. If we are aware we have caused damage, we point it out to the customer. The customer has 48 hours from completion of work to contest damage we may have missed.

## DESCRIPTION OF EQUIPMENT

[illegible]

\* Number of seats if passenger carrier or tonnage if freight carrier.

**INSURANCE QUOTE.**

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**.

The following insurance quote is for:

PIZZA CAKE MOVING CO.

Name of Motor Carrier

14 CIRCLE DR. GREENVILLE SC 29617

Address of Motor Carrier

**Amount of Premium:**

Liability Insurance \$ \$850.00

Cargo Insurance \$ \$1,000

**Limits Quoted (See Below:)**

Limits \$2m Gen. Agg. \$1m. P. & O

Limits \$50,000

\* Attach Certificate of Insurance if available.

Omega U.S. Insurance, Inc.

Name of Insurance Company

1450 EAST AMERICAN AVE. Ste 1775 Schaumburg IL 60173

Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

6-30-09

Date

W. Chaffin

Authorized Insurance Company Representative's Signature

\* Form E and Form H Certificates of Insurance are required to be filed with the Office of Regulatory Staff (ORS). The schedule of minimum limits for Household Goods carriers are listed below:

Vehicle liability for vehicles less than 10,000 lbs. GVWR	\$ 500,000
Vehicle liability for vehicles 10,000 lbs. or more GVWR	\$ 750,000
Cargo - For loss of or damage to property carried on any one motor vehicle	\$ 2,500
For loss of or damage to or aggregate of losses or damages of or to property occurring at any one time and place	\$ 5,000



**Exhibit FWA**

PIZZA CAKE MOULDING Co.

Name

U.S.D.O.T No.

ICC No.

1. Does Applicant have a Safety Rating from the U.S.D.O.T.?

☐ Yes ☒ No ☐ Pending (Submit when received.)

If Yes, indicate rating below and provide copy.

☐ Satisfactory ☐ Conditional ☐ Unsatisfactory

2. Have any of Applicant's drivers or vehicles been places "out of service" by Transport Police safety officers in the past twelve (12) months?

☐ Yes ☒ No

3. Are there currently any outstanding judgment(s) against the Applicant?

☐ Yes ☒ No

4. Is Applicant familiar with all statutes and regulations, including safety regulations and workers' compensation laws that govern for-hire motor carrier operations in South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes ☐ No

5. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes ☐ No

(The attached Insurance Quote form must be completed, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide copy of insurance policies unless requested.)

SWORN TO BEFORE ME

This 22 day of July, 2009

Phyllis Kallan  
Notary Public

Evelyn Thomas

Applicant's Signature

Commission Expires 3-5-2012

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
POST OFFICE DRAWER 11649  
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA

COUNTY OF

GREENVILLE

  
Applicant's Signature

I,

Sely

Name of Applicant's Representative

OWNER

Title

of

PIZZA CAKE MOVING Co.

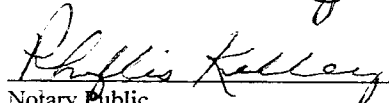
Applicant

the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

  
Signature of Applicant's Representative

SWORN TO BEFORE ME

This 22 day of July, 2009

  
Notary Public

Commission Expires March 5, 2012